

**TOWN OF BUCKEYE**  
**PUBLIC RECORDS INSPECTION AND COPY REQUEST FORM**  
**INFORMATION AND INSTRUCTION SHEET**

Requesting Party: Please read and note the following information and instructions.

Pursuant to A.R.S. § 39-121.01(D), any person may request in person or in writing to examine or be furnished copies, printouts or photographs of any public record during regular office hours (8:00 a.m. to 5 p.m., Monday through Friday).

A person requesting inspection and/or copies, printouts or photographs of public records in person must complete the Town of Buckeye's PUBLIC RECORDS INSPECTION AND COPY REQUEST FORM and present it to either the Town Clerk or the appropriate custodian of records. A written request for copies, printouts or photographs must be mailed, faxed or emailed to the Town Clerk or the appropriate custodian of records, and must include a completed form. The Town Clerk or the appropriate custodian of records may return the request if it is found to lack the specificity necessary to identify the records. The Town Clerk or custodian will charge an amount approximately equal to the cost of reproducing the requested material. Such amount shall be paid prior to delivery of the material.

Pursuant to A.R.S. § 39-121.03, any person requesting copies, printouts or photographs of public records for a COMMERCIAL PURPOSE must provide a VERIFIED STATEMENT setting forth the commercial purpose for which the copies, printouts or photographs will be used. "Commercial purpose" means use of a public record for purpose of sale or resale or for the purpose of producing a document containing all or part of the copy, printout or photograph for solicitation or the sale of such names and addresses to another for the purpose of solicitation or for the purpose of which the purchaser can reasonably anticipate the receipt of monetary gain for the direct or indirect use of such public record.

A person providing a verified statement setting forth the commercial purpose for which the copy or copies will be used may be furnished such copy or copies, the charge for which may include:

1. A portion of the cost to the Town for obtaining the copies of the documents, printouts or photographs to be reproduced.
2. A reasonable fee for the cost of time, equipment, and personnel in making the copies, and
3. The value of the reproduction on the commercial market.

If the custodian of records believes that the commercial purpose of a copy or copies is a misuse of public records or an abuse of the right to receive them, the custodian of records may refuse a request and may request the governor or prohibit the furnishing of copies for such commercial purposes by executive order. If an executive order is not issued within thirty (30) days of the date of application, the custodian of records will provide the copies after being paid the fee requested.

NOTE: An individual who files a verified statement pursuant to A.R.S. § 38-121.03 knowing it to be false or fraudulent, is guilty of felony. A.R.S. § 39-161.

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There is a current charge of 50 cents per page for reproducing material. If the material can be sent via fax or email this charge may be waived.

I, \_\_\_\_\_  
Name (Please print)

Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

on \_\_\_\_\_ (date) hereby request that the custodial of records for the Town of Buckeye provide for inspection and/or a copy or other reproduction certain public record(s) specified below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** If you would like to receive your request via fax or email please include either the fax number or email address below.

Fax Number **OR** Email Address: \_\_\_\_\_

Indicate whether the record(s) is(are) to be used for:

\_\_\_\_\_ Commercial Purpose

\_\_\_\_\_ Non-Commercial Purposes

**\*\*\*\*\*COMPLETE THIS SECTION ONLY IF THE COPY REQUEST IS FOR  
A COMMERCIAL PURPOSE\*\*\*\*\***

Specifically state the purpose of your request below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, declare that I have read the Information and Instructions on back of this form (or A.R.S. § 39-121.03 itself) and understand the contents herein. I further declare under penalty of perjury that the foregoing is true and correct.

Requesting Party's Signature

STATE OF ARIZONA )

)

County of Maricopa )

\_\_\_\_\_

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_, 2006 by

\_\_\_\_\_.

My Commission Expires

\_\_\_\_\_  
Notary Public

For Town Use Only

Date Provided \_\_\_\_\_